

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21361

FILED
Mar 25, 2008
Secretary of State

Entity Name: TEMPLE MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

TEMPLE M. B. CHURCH
1723 NW. 3 AVE
MIAMI, FL 33136

New Principal Place of Business:

Current Mailing Address:

TEMPLE M. B. CHURCH
1723 NW. 3 AVE
MIAMI, FL 33136

New Mailing Address:

FEI Number: 65-0168456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARK A. VALENTINE, ESQ.
4770 BISCAYNE BLVD. #1150
MIAMI, FL 33137 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DEVEAUX, GLENROY,
Address: 10710 S.W. 222ND DRIVE
City-St-Zip: MIAMI, FL

Title: VTD () Delete
Name: BASIEVA, BRYANT
Address: 4720 NW 23RD AVENUE M
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: COLEBROOKE, LULA
Address: 777 NW 42ND STREET
City-St-Zip: MIAMI, FL 33127

Title: VSD () Delete
Name: JOHNSON, GEORGE E
Address: 1725 NW 179 STREET
City-St-Zip: MIAMI, FL 33056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VTD (X) Change () Addition
Name: BASHEVA, BRYANT
Address: 4720 NW 23RD AVENUE M
City-St-Zip: MIAMI, FL 33142

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLENROY DEVEAUX

PD

03/25/2008

Electronic Signature of Signing Officer or Director

_____ Date